

HCS SB 407 -- CANCER SCREENINGS

SPONSOR: Klindt (Luetkemeyer)

COMMITTEE ACTION: Voted "do pass by consent" by the Committee on Financial Services by a vote of 16 to 0.

Current law requires health insurers to provide coverage to cancer patients for routine patient costs incurred as a result of drugs and devices used in clinical trials, even if those drugs and devices have not been approved by the U.S. Food and Drug Administration (FDA) for use in treating the patient's particular condition. This substitute clarifies that accident-only policies, specified disease policies, Medicare supplement policies, and other types of limited benefit health insurance policies are exempt from this mandate. The substitute also clarifies that health carriers may offer health benefit plans that contain a variety of deductibles and coinsurance differentials.

FISCAL NOTE: Estimated Net Cost to General Revenue Fund of Unknown in FY 2004, FY 2005, and FY 2006. Estimated Net Income to Insurance Dedicated Fund of \$8,000 in FY 2004, \$0 in FY 2005, and \$0 in FY 2006. Estimated Net Cost to Other Funds of Unknown in FY 2004, FY 2005, and FY 2006.

PROPOSERS: Supporters say that the bill merely clarifies that the provision does not apply to limited benefit policies. Those types of policies are more affordable specifically because they are limited.

Testifying for the bill were Senator Klindt; Blue Cross Blue Shield of Missouri; American Cancer Society; Missouri Association of Health Carriers; and United Health Care of the Midwest.

OPPOSERS: There was no opposition voiced to the committee.

Richard Smreker, Senior Legislative Analyst